



LISA M. LEONDIS
AGRICULTURAL COMMISSIONER/
SEALER OF WEIGHTS & MEASURES

County of San Diego

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WEIGHTS & MEASURES
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CORRECTIVE ACTION FORM to DOCUMENT RETURN TO COMPLIANCE

BUSINESS NAME _____

ADDRESS _____ CITY _____ ZIP _____

VIOLATION	DATE CORRECTED	INDICATE HOW VIOLATIONS WERE CORRECTED (ATTACH ANY SUPPORTING DOCUMENTATION TO THIS FORM)
Example: 67.808(a)(1)	4-20-08	Annual stormwater training completed; see attached copy of records.

I certify under penalty of law that this business/site has corrected all violations marked on the Water Quality Compliance Inspection Report/Notice of Violation. I have personally examined and am familiar with the information submitted and believe the information is true, accurate and complete. I am authorized to file this certification for the business/site, and am aware there are significant penalties for submitting false information.

Responsible Party _____ **Job Title** _____
Print Name

Signature of Responsible Party _____ **Date** ____/____/____

◀ **Send completed form and supporting documentation to the address/fax in the letterhead or e-mail to your inspector.** ▶

COUNTY OF SAN DIEGO USE ONLY: Inspection/Violation No. _____ Inspection Date _____
Reviewed by: _____ Date _____
Inspector's Comments: _____

☐ All violations noted on the date listed above were corrected.